



One South Church Avenue  
Suite 1700  
Tucson, Arizona 85701-1621  
520.770.8700  
Fax 520.623.2418  
www.quarles.com

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Milwaukee and Madison, Wisconsin  
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To:	Fax No.	Phone No.
<b>Name</b> Examiner Son T. Nguyen Art Unit 3643  <b>Company/Firm</b> U. S. Patent & Trademark Office Alexandria, VA	571-273-8300  <u>After Final</u>	

<b>From:</b>	Antonio R. Durando	520-770-2236	520-770-8760
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<b>Message:</b>		
APPLICANT: FORD, GARRETT N.  SERIAL NO.: 10/743,570  EXAMINER: NGUYEN, SON T.  TITLE: SHOCK-ABSORBING BUSHING FOR STIRRUP	DOCKET NO.: 122142.00008  FILED: 12/22/2003  ART UNIT: 3643	<b>RECEIVED</b> OIPE/IAP  SEP 07 2005
Attachments: Notice of Appeal from the Examiner to the Board of Patent Appeals and Interferences (in duplicate)		

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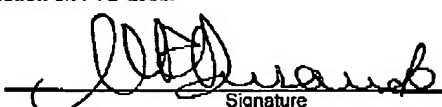
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Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ <u>500.00</u>	
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<input type="checkbox"/> applicant/inventor.		<u>520-770-8760</u> Telephone number	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		<u>9/6/05</u> Date	
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>28,409</u>			
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____			
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Signature <u>Kathleen C. Tennant</u>		Application Number 10/743,570	Filed 12/22/2003
Typed or printed name <u>Kathleen C. Tennant</u>		For Shock-Absorbing Bushing for Stirrup	
		Art Unit 3643	Examiner Son T. Nguyen

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I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest.  
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.  
(Form PTO/SB/96)

☒ attorney or agent of record.  
Registration number 28,409

☐ attorney or agent acting under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34. \_\_\_\_\_

Antonio R. Durando  
Signature  
Typed or printed name

520-770-8760  
Telephone number

9/6/05  
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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